

TENNESSEE GENERAL ASSEMBLY  
FISCAL REVIEW COMMITTEE



**FISCAL NOTE**

**HB 642 - SB 956**

March 14, 2021

**SUMMARY OF BILL:** Requires the Department of Health (DOH), in collaboration with the Tennessee Maternal Mortality Review and Prevention Team, to create an evidence-based implicit bias training program related to maternal and infant mortality for healthcare professionals. Requires DOH to collect certain data related to maternal and infant mortality. Prohibits a healthcare professional licensing authority from renewing the license, registration, accreditation, or certification of a healthcare professional unless the healthcare professional provides proof that the healthcare professional completed the implicit bias training program. Requires a healthcare professional who holds a current license, registration, accreditation, or certification on December 31, 2021 to complete the training no later than December 31, 2022. Requires a healthcare professional who is issued an initial license, registration, accreditation, or certification on or after January 1, 2022 to complete the training within one year of issuance. Establishes a perinatal patient bill of rights. Requires facilities that provide perinatal care to provide each perinatal care patient a copy of such rights upon admission to the facility, or as soon as reasonably practical following admission to the facility. Effective January 1, 2022.

**ESTIMATED FISCAL IMPACT:**

**Increase State Expenditures - \$110,900/FY21-22**

**\$66,300/FY22-23 and Subsequent Years**

**Assumptions:**

- Based on information provided by the DOH, the proposed legislation cannot be accommodated within existing resources. The DOH will require one Public Health Program Director 2 position to develop, train and oversee the program.
- The Public Health Program Director will be hired in FY21-22 for purposes of creating the required training prior to January 1, 2022.
- The one-time increase in state expenditures associated with the position is estimated to be \$4,600 (\$1,900 computer costs + \$2,700 office furniture).
- The recurring increase in state expenditures associated with the position is estimated to be \$66,298 (\$42,408 salary + \$13,790 benefits + \$7,900 administrative costs + \$1,600 communications + \$600 supplies).
- According to the DOH, the training will consist in part of a pre-recorded training video accompanied by a quiz for verifying understanding and verification that the license holder has completed the requirement.

- In order to provide the training video and quiz, updates to the Licensure and Regulatory System (LARS) at a one-time cost of \$40,000 will need to be made in FY21-22 so that the training will be available to all of the healthcare professionals beginning January 1, 2022.
- The total increase in state expenditures is estimated to be \$110,898 (\$66,298 + \$4,600 + \$40,000 LARS) in FY21-22.
- The total increase in state expenditures is estimated to be \$66,298 in FY22-23 and subsequent years.
- The proposed legislation will not have a significant impact on the procedures or processes of the health-related boards; therefore, any fiscal impact is estimated to be not significant.
- Pursuant to Tenn. Code Ann. § 4-29-121, all health-related boards are required to be self-supporting over a two-year period. The Boards had an annual surplus of \$2,524,075 in FY18-19, an annual surplus of \$1,107,948 in FY19-20, and a cumulative reserve balance of \$34,229,587 on June 30, 2020.

### **CERTIFICATION:**

The information contained herein is true and correct to the best of my knowledge.



Bojan Savic, Interim Executive Director

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